

Disabilities and Rehabilitation - Transitions - February 2001
Indiana news and information on developing community-based services

Upcoming Dates:

Subcommittee Meetings * May 2 - Developmental Disabilities

* May 3 - Mental Health

* May 4 - Aging & Physical Disabilities.

Public Meetings are planned for April. More information to follow.

Message from Katie Humphreys

Welcome:

I want to welcome you to the first issue of Transitions, a newsletter about Indiana's efforts to deinstitutionalize and provide a strong base of community services for its people with disabilities. Through this newsletter, we will let you know what is going on as we advance the planning effort to enhance statewide dialogue on what we should do, how we can do it and when.

Please pass this newsletter on to a friend, and let us know of others who might want to receive it. We want to engage as many Hoosiers as possible in this effort; your efforts to "spread the word" and extend our mailing list will help us to do this.

Thank you for reading this and please let us know what you think!

Katie Humphreys
Secretary
Indiana Family and Social Services Administration

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Indiana's Commitment

- To replace unnecessary institutionalization with community supports and services
- To include persons with disabilities, families, advocates & providers in development and implementation of the plan
- To set measurable objectives so we can measure success

State Operated Care Facilities Council's Executive Summary

The Governor's Council on State-Operated Care Facilities, created by Governor O'Bannon in September 1999, was given the charge of developing a long-range plan that will ensure the provision of high quality, cost-efficient care in the 11 state-operated care facilities under review. The Council relied on input from a variety of key stakeholders to develop specific recommendations that successfully achieve this charge. Before developing these recommendations, the Council reviewed a wide range of information; including overviews of the current systems of care in place in Indiana, summaries of best practices in other state systems, and summaries of trends in service delivery for all populations under the charge.

In addition to reviewing the above information, the Council also recognized the need for developing a consensus on a summary of beliefs that would guide them during the decision-making process. The Council's summary of beliefs is as follows:

The Council believes that people with developmental disabilities, mental illness, and other health or educational needs, should have access to an array of appropriate services and support. Whenever possible, these services should be provided in the least restrictive environment within integrated settings in their local communities. The Council also believes that one key role the state-operated care facilities will provide is crisis treatment, rehabilitation or intervention in settings as close to home as possible. The Council also recognizes that some individuals will continue to require and/or prefer sustained care in an institutional environment.

A. Overall Systems of Care

Overview of Regionalization – The Council acknowledges the need to significantly improve the linkage that exists between the facilities and community resources.

Best Practices – The Council recommends that the State of Indiana regionalize its systems of care for the distinct populations being served. The Council also recommends that each system of care focus on developing or strengthening the role of gatekeeper that would serve as a single point of entry and coordinator of care for each client served in the system.

Establishment of Regional Hubs – The Council recommends the establishment of regional hubs, which include local and regional planning councils.

Potential Impact of Regionalization – The focus would be on development and enhancement of community service infrastructure in each region.

B. Regional Centers

Projected Census 2005 – The agency analysis projects that the state-operated care facility census could decrease from 2,121 individuals to 1,360 individuals by the year 2005.

Anticipated Capital Needs – The Council, working with consultants also completed an analysis of anticipated capital needs for the current facilities over the next 10 years. This analysis concluded that all the facilities have significant capital needs.

1. Recommendations for Specific Populations – The Council developed specific recommendations for each population receiving services in the regional or multi-service centers. The Council also recommends the establishment of a 100-bed high security facility for individuals with mental illness who exhibit dangerous behaviors.
2. Staffing Recommendations – The Council recommends that the services line model be implemented in each region or multi-service center. The Council also identified the need to ensure that active treatment is provided on evenings and weekends on a consistent basis in all the regional centers.

C. Quality Assurance

These recommendations include expansion of the Adult Protective Services program, creation of a system-wide toll free number to report complaints, and development of a uniform complaint system in all regional facilities as well as in the community. Comprehensive recommendations have been developed that address the data system used in the centers and identify specific performance indicators that should be monitored.

D. Development and Assessment of Implementation Plan

The Council recommends that an implementation plan be developed that involved stakeholders by regional communities themselves. This implementation planning should take into account the direction of the recommendations outlined in the final report.

FSSA Programs and Community Integration

January 2001

In June of 1999, the U.S. Supreme Court in the case of Olmstead v L.C. and E.W. ruled that, under the Americans with Disabilities Act, unjustified isolation of people with disabilities is discrimination based upon disability. An Executive Order by Governor O'Bannon makes clear that it is the goal of the State of Indiana to create community-based alternatives to institutional care for citizens with disabilities, with consumer choice and involvement as an underlying principle.

The Family and Social Services Administration (FSSA), the agency responsible for the state's planning effort that is designed to implement the Governor's Executive Order, is

conducting a comprehensive study of all services and programs available to people with disabilities in Indiana. As part of this effort, FSSA and its Community Integration Action Team will be seeking reaction and responses from the members of three subcommittees appointed by the Secretary of FSSA in December 2000. These subcommittee members, who represent the real experts about a community-based system of supports and services for persons with disabilities, include people with disabilities and their families, advocates, and members of the community who are providing supports and services. The subcommittees will advise The Action Team on needs, problems and issues, use of written public input and evaluate plan drafts, public input and other information which will help in development of the strategies, resources and services needed.

In order to facilitate the work of the subcommittees and the development of a comprehensive plan, the Action Team identified nine areas FSSA needed to address in order to assess the existing framework of services and programs available to meet the needs of people with disabilities in integrated community settings. These assessments also include FSSA's plans for continued community integration of individuals currently living in institutions. While worded slightly different on the individual assessments, these nine questions are:

1. What are current systems of service delivery for persons with disabilities?
2. What are services available to persons with disabilities and how many persons are being served now? What are the current and future needs for services?
3. What is the level of demand for receiving services in less restrictive settings?
4. What are the short-term and long-term barriers to achieving total community integrations of persons with disabilities?
5. How can we provide older adults and persons with disabilities more opportunities for informed choice?
6. What changes can be made to assure that qualified individuals can be placed in more integrated community-based settings?
7. What strategies would be most effective in achieving the needed changes?
8. How can we bring these strategies together in a coherent plan of action for moving capable individuals into community-based settings?
9. How can we monitor and evaluate this activity to assess that what we are doing works?

The reports from each of FSSA's divisions charged with providing or arranging for services to persons with disabilities will provide the basis for discussion and response from each of the subcommittees as FSSA develops its plan. The plan is due to the Governor in June 2000.

Members of each of the subcommittees appointed to date include:

Mental Health

Dennis Born
Dorothy Conklin
Tom Gallagher
Brenda Hamilton
Phyllis Hamilton
Debbie Hermann
James F. Jones
Kevin Kelty
Jana Kosinski
Mike Maloney
Bob Marra
Stephen C. McCaffrey
Pam McConey
John McIlvried
Dave Thomas
Marge Towell
Jane Venable

Developmental Disabilities

Bitta DeWees
John Dickerson
Tamyra Freeman
Cris Fulford
Deeann Hart
Sue Ellen Jackson-Boner
James Lowes
David Mank
Tina Massingale
John McCauley
Dan McDonough
Angela Miles
Costa Miller
Susan Rinne
Margot Sabato
Suzanne Shackelton
Pat Stewart
Bernie Tidd
Teresa Torres

Aging & Physical Disabilities

Susan Albers
Steve Albrecht
Larry Armogost
Jackie Arnold

Tom Bailey
Mark Bair
Ed Bell
Emas Bennett
Bill Booth
John Cardwell
Melissa Durr
Duane Etienne
Nancy Ford-Winters
Arturo Garcia
Nancy Griffin
Dale Helmerich
Anne Jacoby
Faith Laird
Jim Leich
Jean Macdonald
David Nelson
Mary Jane Phillippe
Dr. Stephen Rappaport
Luis Roman
Paul Severance
Emma Sullivan
Georgine Sutkowski
Al Tobert
Karen Vaughn

For More Information, visit the Family and Social Services Administration on the World Wide Web at: www.in.gov/fssa

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Transitions Newsletter

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